\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." \*\*\*\*If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3."

Minus

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-675 (Rev. 8/01)

Independent

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

OR

OR

X84 =

+280=

ADDIT, FEE

TOTAL

X42 =

+140=

ADDIT. FEE

TOTAL

oplication or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

1-500 -1115A

Ellective October 1, 2000								1 8CC95 WFN					
		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			.5				RA	ΓE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			≤ minus 20=		· Ø		X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			( minus 3 =		* Ø		X4	0=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+13	5=		OR	+270=		
* If the difference in column 1 is less than zero,					enter "0" in column 2			ΓAL		OR	TOTAL	710	
CLAIMS AS AMENDED								SMALL ENTITY			OTHER SMALL I		
F	Decover the second	(Column 1) CLAIMS			mn 2) HEST	(Column 3)		\LL		OR I I	O		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	endent + Minus +**  T PRESENTATION OF MULTIPLE DEPENDEN		T OL AIM	<u>                                     </u>	X4	0=		OR	X80=			
	FIRST PRESE	NIATION OF M	ULTIPLE DEP	ENDEN	II CLAIM		+13	35=		OR	+270=		
	· · · · · · · · · · · · · · · · · · ·							OTAL FEE	-	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								. I CL		a a	A0011.1 EE	`	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	_  xs	9=		OR	X\$18=		
	Independent	*	Minus	***	T OL ALL	=	X4	0=		OR	X80=		
	FIRST PRESE	NIATION OF M	ULTIPLE DEF	ENDEN	II CLAIM	<u> </u>	+1:	35=		OR	+270=		
							ADDIT	OTAL . FEE		OR	TOTAL ADDIT. FEE		
		<u>)</u>			_ ====								
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	AND THE PROPERTY OF	NU PREV	HEST MBER (IOUSLY D FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	Ĭ.	
A SA	Independent		Minus	***	UT CL :::	=	_ X4	0=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPI				VI CLAIN	<u> </u>	_    <del>                                  </del>	35=		OR	+270=	,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE													
	"If the "Highest Nu The "Highest Nu	imber Previously I	Paid For" IN TH	S SPACE	E is less th	an 3. enter "3."	,		propriate bo	2			